

**MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
REPORTING OF SOLICITATION OF CONTRIBUTIONS FOR
POLITICAL COMMITTEES, ELECTIONEERING COMMUNICATIONS ORGANIZATIONS,
501(c)(4) ORGANIZATIONS AND POLITICAL PARTIES**

Name Joe CAROLLO

Address (number and street) 3126 Coral Way

City, State, Zip Code MIAMI, FL. 33145

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CITY OF MIAMI

Filing as:

Elected Official
Office: _____

Miami-Dade County Candidate
Office: _____

Municipal Candidate City of MIAMI
Office: City Commissioner, District 3 (Name of Municipality)

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

<p>I certify that I have examined this report and it is true, correct, and complete. (SECTION APPLICABLE TO CANDIDATES ONLY)</p> <p>(Type name) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p><u>X</u> _____ Signature</p> <p>_____ Date</p>	<p>I certify that I have examined this report and it is true, correct, and complete. (FOR BOTH ELECTED OFFICIALS AND CANDIDATES)</p> <p>(Type name) <input type="checkbox"/> Elected Official <input checked="" type="checkbox"/> Candidate</p> <p><u>X</u> <u>Joe Carollo</u> _____ Signature</p> <p><u>6/12/2017</u> Date</p>
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